

The National Professional Development Center on Autism Spectrum Disorders (ASD), funded by the U.S. Department of Education, Office of Special Education Programs is a multi-university program that began on July 1, 2007. The mission of the Center is to provide resources, professional development, and technical assistance that will increase the number of highly qualified personnel serving children and youth with ASD by:

- promoting evidence-based practices for early identification, intervention, and education that produce optimal child (infancy to 22 years) and family outcomes;
- providing sustainable, outcome-based professional development and technical assistance that optimize existing state resources;
- establishing model sites that showcase evidence based practices (EBP); and
- evaluating/measuring child, family, practitioner, and system level outcomes.

Three states with the greatest potential to benefit from the resources of NPDC on ASD will be selected each year from 2007 through 2010. Each of the three regional centers of the National Professional Development Center on Autism Spectrum Disorders (the Center) will collaborate with selected states for a period of two years to achieve these goals.

State partners will be selected through a competitive application process. Three states will be selected annually from 2008 through 2010. Applications and additional information about the Center are available on the project web site at www.fpg.unc.edu/~autismpdc. Applications for each cohort are due by May 1. Cohort 1 states (2008-2009) include Indiana, New Mexico, and Wisconsin, and Cohort 2 states (2009-2010) include Kentucky, Michigan, and Minnesota.

The National Professional Development Center on Autism Spectrum Disorders is a multi-university program comprised of the following partners.

FPG Child Development Institute

University of North Carolina at Chapel Hill Sam Odom Deborah Hatton Jim Bodfish

UNC

Waisman Center

University of Wisconsin-Madison

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Evidence-Based Practices for Children and Youth with ASD

The National Professional Development Center on ASD has adopted the following definition of evidence-based practices.

To be considered an evidence-based practice for individuals with ASD, efficacy must be established through peer-reviewed research in scientific journals using:

- randomized or quasi-experimental design studies. Two high quality experimental or quasi-experimental group design studies,
- single-subject design studies. Three different investigators or research groups must have conducted five high quality single subject design studies, or
- combination of evidence. One high quality randomized or quasi-experimental group design study and three high quality single subject design studies conducted by at least three different investigators or research groups (across the group and single subject design studies).

High quality randomized or quasi experimental design studies do not have critical design flaws that create confounds to the studies, and design features allow readers/consumers to rule out competing hypotheses for study findings. High quality in single subject design studies is reflected by a) the absence of critical design flaws that create confounds and b) the demonstration of experimental control at least three times in each study.

This definition and criteria are based on the following sources:

- Horner, R., Carr, E., Halle, J., McGee, G., Odom, S., & Wolery, M. (2005). The use of single subject research to identify evidence-based practice in Special Education. *Exceptional Children*, 71, 165-180.
- Nathan, P. & Gorman, J. M. (2002). *A guide to treatments that work.* NY: Oxford University Press.
- Odom, S. L., Brantlinger, E., Gersten, R., Horner, R. D., Thompson, B., Harris, K. (2004). *Quality indicators for research in special education and guidelines for evidence-based practices:*Executive summary. Arlington, VA: Council for Exceptional Children Division for Research.
- Rogers, S.J., Vismara, L.A. (2008). Evidence based comprehensive treatments for early autism. *Journal of Child Clinical Psychology*, *37*(1), 8-38.